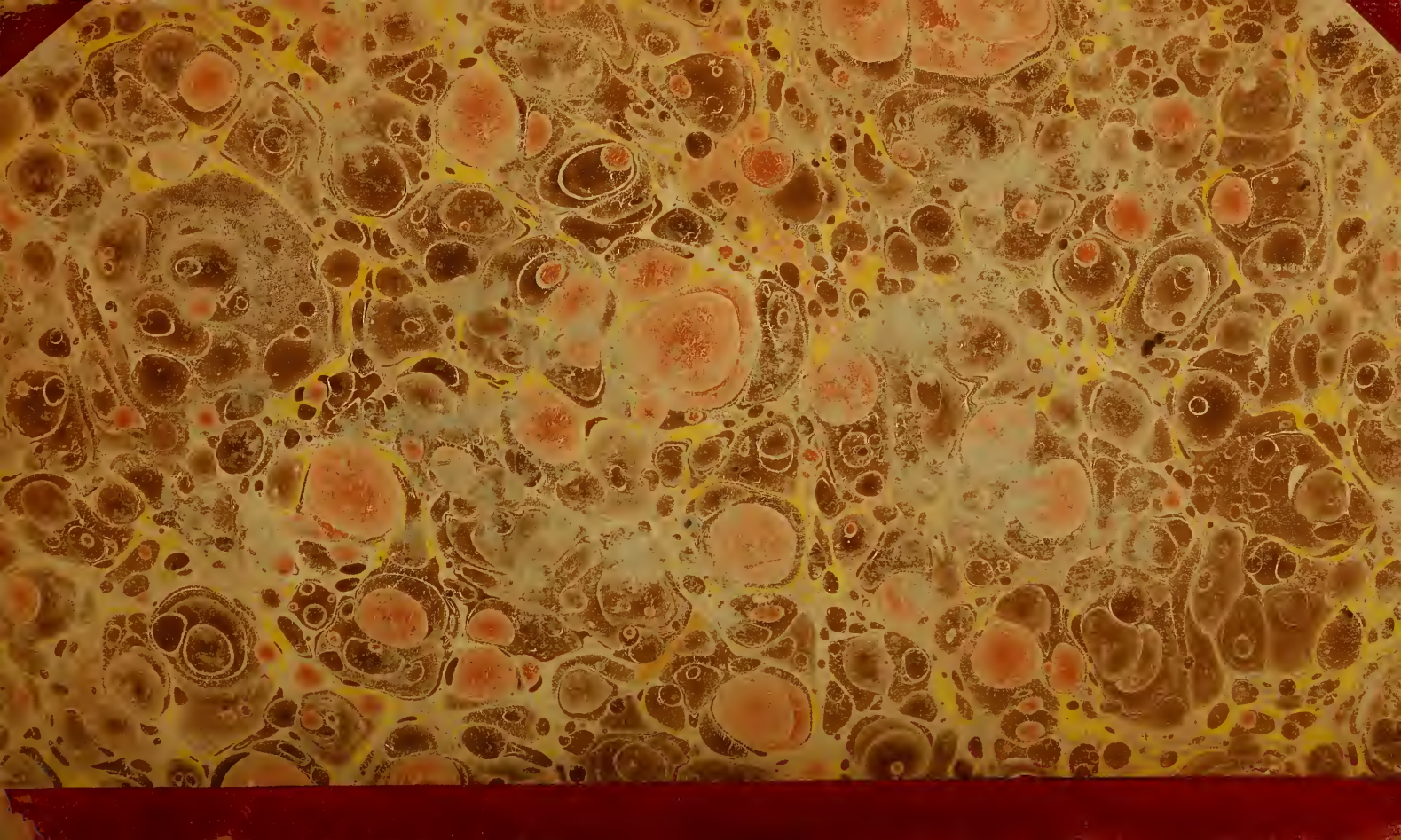

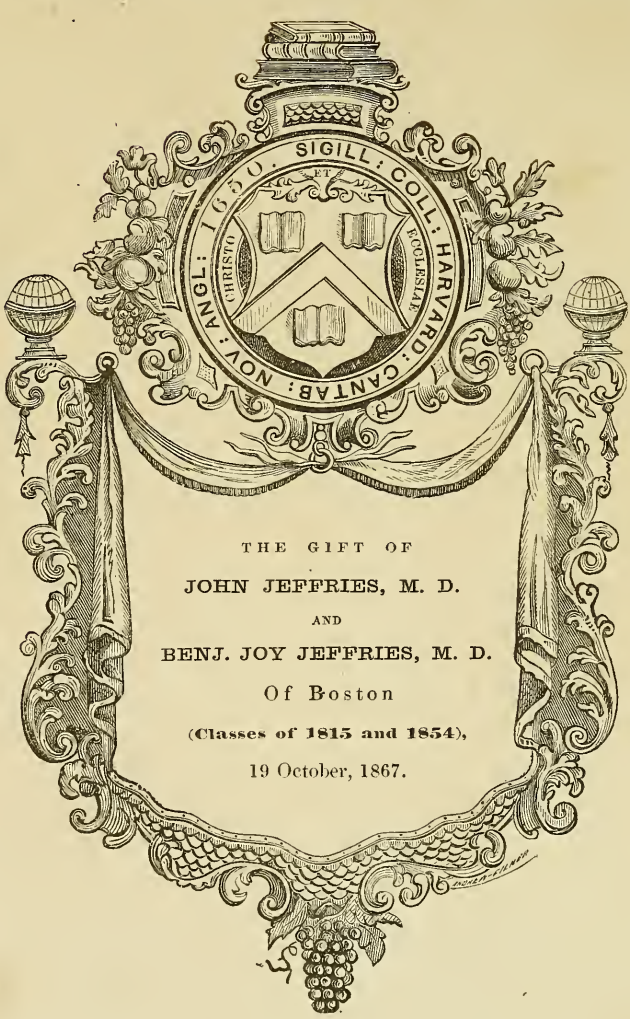

THE GIFT OF

JOHN JEFFRIES, M. D.

AND

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Of Boston

(Classes of 1815 and 1854),

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CASES

OF A

SERIOUS MORBID AFFECTION,

OCCURRING PRINCIPALLY AFTER

DELIVERY, MISCARRIAGE, ETC.

BUT ALSO

INDEPENDENTLY OF THE

PUERPERAL STATE.

CASES

OF A

SERIOUS MORBID AFFECTION,

CHIEFLY OCCURRING AFTER

DELIVERY, MISCARRIAGE, ETC.

FROM VARIOUS CAUSES OF

IRRITATION AND EXHAUSTION;

AND OF A

SIMILAR AFFECTION,

UNCONNECTED WITH THE

PUERPERAL STATE.

BY

MARSHALL HALL, M. D. F. R. S. E.

&c. &c.

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THE Attention of the Profession has been amply fixed on the extensive INFLUENCE OF INTESTINAL IRRITATION, on the general System.

But I am not aware that any author has sufficiently explained the EFFECTS OF REPEATED OR PROTRACTED LOSS OF BLOOD, OR OF EXHAUSTION FROM OTHER CAUSES. Much less have these effects been shewn to RESEMBLE those of some Inflammatory affections, or been CONTRASTED with them, and DISTINGUISHED from them. No writer has, I think, sufficiently exposed the DANGERS by which the subject is attended, or pointed out the CIRCUMSTANCES, in which these dangers are liable to be encountered.

I have undertaken to supply these deficiencies in the following pages, which I lay before my professional brethren, with the hope that they may contribute something to extend our knowledge of Medicine and of Remedies, and to alleviate the sufferings of Mankind.

M. H.

Nottingham, May 18, 1820.

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" WHEN the puerperal fever of a true inflammatory nature exists, I feel I am right in the opinion I have advanced respecting bleeding. But as it is sometimes EXTREMELY DIFFICULT TO DISTINGUISH BETWEEN THIS FEVER AND COMPLAINTS PROCEEDING FROM MERE IRRITABILITY, which far more frequently occur, especially in very delicate habits, and among women of high rank; and as all the complaints arising from irritability would at this time be INCREASED BY BLEEDING, AND RENDERED DANGEROUS BY A REPETITION OF IT; I recommend in the strongest terms, that we should be ACCURATE IN OUR DISTINCTIONS before we determine on a plan, on our reliance and pursuit of which the good of our patient may so essentially depend."

Denman's Midwifery

ON A

SERIOUS MORBID AFFECTION

OCCURRING AFTER

DELIVERY, ABORTION, ETC.

I. AN accurate knowledge of the morbid affection which forms the subject of the following pages, must be of inexpressible importance to the physician and the accoucheur. For a mistake on this point has plunged the patient into imminent and even irretrievable danger, by leading to the erroneous or undue employment of a most powerful remedy.

II. Yet I think the subject has been unaccountably neglected. The works on Midwifery and Puerperal and Female Diseases usually consulted at least, are extremely deficient with regard to it.

III. This circumstance will appear the more extraordinary, if the statement I am about to make be,

as I believe, correct,—namely, that THE MORBID AFFECTION IN QUESTION CONSTITUTES A GREAT PROPORTION AMONG PUERPERAL CASES, AND A GREAT MAJORITY AMONG THE FATAL ONES, AND, OF THESE FATAL CASES, MANY ARE DAILY RENDERED SO BY A MISTAKEN USE OF THE LANCET.

IV. Writing as I do, under the influence of this conviction, I feel persuaded that I shall be readily excused for calling the attention of medical men to this subject in the most prompt and earnest manner, even although it should appear, that my little work would have gained in accuracy and extent of information by delay. For in consequence of this delay, might not the stream of life be allowed to flow, in a few instances at least, in which it may, by this early publication, be retained in its fountain?

V. Whilst this affection arises from various sources of Irritation and of Exhaustion, it is apt to produce symptoms resembling those of Increased Action, or of Inflammation, prompting the use of evacuant remedies, which, by co-operating with the original cause, aggravate the symptoms of the disease, and thus, unfortunately, sometimes appear to indicate the necessity of still more active measures of the same kind; and, in this manner, the patient has, in some instances, as will be seen hereafter, even expired under the immediate employment of the Lancet.

VI. It is almost needless to mention how incident the causes of Irritation and of Exhaustion are to the puerperal state, and therefore how frequently we must meet with the effects of these causes, at this period. At the same time, every physician is aware how liable the puerperal state is to different inflammatory affections. If we connect these facts with the remark already made, that the *symptoms* of these two classes of morbid affections, so *opposite* in their cause, nature, and treatment, are in many instances extremely *similar*, the subject will acquire the greatest possible interest.

VII. It cannot, of course, be conceived to be any part of this essay to inculcate the neglect of bloodletting in the case of inflammation. But, as this remedy misapplied is sometimes fatal, I would recommend, in the strongest terms, the utmost caution,—the strictest attention to the DIAGNOSIS,—and the greatest vigilance in regard to the effects of bleeding, should this measure be once instituted.

THE CAUSES.

VIII. This affection appears to arise from different sources of Irritation and Exhaustion, especially as concurring after the fatigue and shock which the system undergoes during labour or abortion.

IX. The principal source of Irritation is a disordered and loaded state of the alimentary canal; the principal source of Exhaustion, uterine hæmorrhagy.

X. This morbid affection is particularly apt to affect those persons, who, previously to delivery, have laboured under a deranged state of the bowels,—with constipation, diarrhœa, sickness, &c. It has occurred in females who had previously to conception, been affected with that complaint, which I have, in a little work lately published, denominated the Mimosis Decolor. It has occurred, in several persons, who, besides the pallor and icterode complexion, of that disorder, had been affected, previously to delivery, with anasarca. And it has occurred in several individuals who had suffered from aphthæ, attended by an irritable state of the stomach and bowels.

XI. This affection appears to be frequently induced by copious, but especially by protracted uterine hæmorrhagy, the menorrhagia lochialis, imprudent or too copious or long continued lactation, sickness, diarrhœa, &c. It frequently occurs in persons who have, previously to delivery, been reduced by venæsection and other remedies necessary to subdue an inflammatory disease. It has been induced or much aggravated by misapplied venæsection after confinement; and it has immediately followed the violent operation of a purge.

XII. This morbid affection is particularly apt to attack the delicate and feeble in constitution. It is aggravated or even induced, by too great closeness and and warmth of the patient's room, or of the weather. The fatigue of a lingering labour,—the violence of labour-pains,—anxiety of mind,—alarm and hurry, &c. have all appeared to be concurrent causes of this morbid affection.

XIII. It is not impossible that improper articles of diet may also have contributed their share in causing this complaint. But I cannot recall to mind any fact by which this idea is substantiated. This remark must, therefore, be considered as conjecture only. It is also not improbable that imprudent fatigue, from too early rising, after delivery, has also had a baneful influence in inducing this malady.

XIV. In some cases the pain attending this affection has been experienced during the latter period of pregnancy, as in Cases IV, XXIII, &c. In these instances is it not probable that the cause exists in the state of the bowels?

XV. It may here be remarked that some of the symptoms of the morbid affection in question, which have been continued by protracted uterine hæmorrhagy or lactation, have immediately ceased on removing the cause, by the lotion to be recommended hereafter, or by weaning. These causes of some painful affections, are too apt to be overlooked in practice; headach, palpitation, nervousness, alarm, and sometimes delirium even, have been kept up by these unsuspected causes.

THE HISTORY, COURSE, ETC.

XVI. This morbid affection has, in some instances, given rise to sudden and unexpected dissolution after confinement. Is it not, in fact, by this complaint that the Nation has been bereaved of a Princess on whom every hope and heart was fixed, and has been plunged into lasting mourning? An instance of the unexpected fatal issue of this affection has lately come to my knowledge; but the particulars could not be obtained in a sufficiently accurate form for publication; the patient was of feeble constitution, had suffered from a protracted form of Mimosis, and from aphthæ with irritability of the stomach and bowels.

XVII. Occasionally the patient does not recover from an ill directed bleeding. This point is sufficiently illustrated by the cases given in Section the third.

XVIII. Sometimes the affection terminates fatally after a more or less urgent or protracted and varied course. This termination is illustrated by Section the second.

XIX. In some instances there has been long continued indisposition. This was observed in Cases IV, XV, and XVI. But in these instances there has usually been some previous complaint, and most frequently a state of Mimosis.

XX. Lastly, this affection has frequently yielded favourably to the resources of Art. And this, I am happy to say, has been the almost invariable result of the employment of the plan of treatment to be described hereafter.

XXI. This affection appears principally under the following forms; 1. the acute; 2. the more continued; 3. with general symptoms; 4. with some predominant local affection; 5. as the effect, chiefly, of intestinal irritation,—or 6. of hæmorrhagy. The greater number of cases do not, however, admit of being referred to any one of these divisions distinctly or exclusively, but assume a mixed character.

THE DESCRIPTION, SYMPTOMS, ETC.

XXII. When this affection has come on in an acute form, the first symptom has usually been severe and long continued rigor, succeeded by great heat of surface, great frequency of pulse, and some serious affection of the head, or of the abdomen. This was observed in Cases, I, II, IV, VIII, IX, X, XIX, and it is probable that rigor occurred in some of the other cases although unnoticed in the reports; in these there were the other symptoms noticed above.

XXIII. When, on the contrary, the attack of this affection is slower and more insidious, the rigor is less observed, the heat of surface perhaps absent, and there is throbbing pain of the head, with vertigo in the erect posture, or fluttering and palpitation of the heart, or oppressed, hurried, and sighing breathing, or irritability of the stomach and bowels, &c. as observed in Cases V, XV, XVI, XVII, XX, XXI.

XXIV. Much will depend on the constitution of the patient, and on the cause of the affection, especially the latter. Great intestinal irritation is apt to

induce a sudden attack, with rigor and much febrile heat. Serious uterine hæmorrhagy will also produce these effects, as observed in Case XIX, in which, however, as is usual, these two causes most probably co-operated. The consequences of profuse hæmorrhagy are well known. The effects of continued irritation of the stomach and bowels, and of protracted and reiterated uterine hæmorrhagy, menorrhagia, or undue lactation, are insidious and protracted; § XXIII.

XXV. The course of this affection is generally influenced, in like manner, by the constitution, and the cause, and usually varies with the form of the attack. There are, in many cases, frequent changes, —attacks of alarming symptoms,—urgent messages, —sense and fear of impending dissolution, &c.

XXVI. The symptoms vary in degree, form, and assemblage, in every case. They refer themselves in general to the HEAD, HEART, CHEST, STOMACH, BOWELS, UTERUS, THE MUSCULAR SYSTEM, and to different SEATS OF PAIN. In the following account of the symptoms, I shall briefly enumerate, under each of these heads, the various affections which are apt to occur in this complaint, referring the reader to the Cases in the appendix, for exemplification, and for the varied manner, catenation, and connexion, in which they present themselves to the observation of the physician.

XXVII. I shall first premise that, of the two principal causes of this affection, Intestinal Irritation and Uterine Hæmorrhagy, each produces symptoms in some degree peculiar to itself. The former, especially, is the frequent cause of pain of the head, side, iliac region, loins, or some part of the abdomen; the latter, of faintishness, the sense of want of air, gasping, jactitation, sinking, &c. The varied effects of intestinal irritation are amply detailed by the author, in a late essay on the Mimoses. The effects of hæmorrhagy are exemplified in Cases XVI, XVII. But, besides that these two causes generally co-exist, and co-operate, it is remarkable how similar, in general, are their effects. They each seem liable to attack ALL the organs and functions of the body, conjointly or separately. It is however, in general, the circumstance of EXHAUSTION, which adds REAL DANGER to the otherwise URGENT but LESS SERIOUS symptoms of IRRITATION.

XXVIII. The Symptoms which may be referred to the HEAD are the following:—Severe pain; beating and throbbing; rushing, or cracking noises; vertigo or turning round of the room, especially on raising the head or assuming the erect position; intolerance of light, and of sound; wakefulness; starting during sleep; awaking hurried and alarmed, with faintiness, palpitation, feeling of sinking, of impending dissolution &c.; being overcome by noise, disturbance, or thinking even;—and delirium.

XXIX. The HEART is, in different cases, affected with palpitation, fluttering, irregular and feeble action; there are beating and throbbing of the carotids, and sometimes even of the abdominal aorta; great rapidity, and sometimes irregularity of the PULSE; faintishness or fainting, urgent demand for the smelling-bottle, fresh air, fanning, bathing of the temples; feeling of impending dissolution; incapability of bearing the erect position, and sometimes early fainting from the use of the lancet.

XXX. The RESPIRATION is affected in different cases, with panting, hurry, sighing, great heaving, gasping, blowing, moaning, catching, &c. and, as has been stated, with urgent demand for fresh air. There is sometimes a sense of great and alarming oppression about the CHEST.

XXXI. There is in some cases, an IRRITATIVE COUGH,—in violent fits,—or in the form of continual hacking; this cough appears to originate in the larynx or trachea.

XXXII. The STOMACH is liable to become affected with irritability, sickness, retching, vomiting, hiccough, and eructation; the BOWELS with constipation, or diarrhœa, pain, flatus, distension, &c.

XXXIII. There are very frequently urgent restlessness, tossing about, and jactitation. In some

cases, as in Case XXII, various SPASMODIC AFFECTIONS have occurred.

XXXIV. The SEATS OF PAIN are usually the head, the side, the iliac region, the loins, the region of the uterus, and the abdomen generally. The pain of the iliac and uterine region, and of the abdomen, is often attended with much tenderness.

XXXV. Amongst other symptoms should be mentioned the faintishness, the gasping, the feeling of dissolution, &c. of the patient, which sometimes occur after the first and even a moderate bleeding; see Cases III, IV, XIII, XXIII, XXV; in some instances the patient has expressed the utmost dread of being bled, from the feeling of aggravation of her suffering, or of dissolution, induced by it.

THE DIAGNOSIS.

XXXVI. The puerperal affection which is the subject of these pages, is apt, in its various forms, to be mistaken and mistreated for Inflammatory Diseases of the Head, Chest, Heart, Stomach and Bowels, Uterus, and Peritonæum,—but especially for Puerperal Phrenitis and Puerperal Fever, as in the Cases given Section III, and Cases III, IV, VIII—XII, XIX. This fact may tend to explain the discrepancy of opinions respecting the treatment of the last mentioned disease, especially with regard to bloodletting.

XXXVII. The Diagnosis may frequently be attended with difficulty; there will often be occasion for the most careful and anxious WATCHING, and for the utmost PRUDENCE in the administration of remedies and in the observation of their effects.

XXXVIII. The distinction is founded, principally, on the presence of some of the more unequivocal symptoms of the morbid affection treated of in this essay, as detailed from § XXV to § XXXV.

XXXIX. In the case in which the practitioner has had recourse to bloodletting, the effect of this remedy should be closely remarked;—early faintiness,—increased frequency of the pulse,—gasping,—internal feeling of dissolution,—unremitting pain, &c. are circumstances which ought, at least, to lead to the greatest caution and circumspection with regard to the further use of this remedy. See Cases III, IV, XIII, XIV, and Section III.

XL. In all cases the colon and rectum should be unloaded by enemata. This measure affords a source of Diagnosis of the utmost importance, in the relief it confers, and in the opportunity it gives for the observation of the state of the intestinal contents.

THE TREATMENT.

XLI. The treatment consists in cautiously removing the causes, whether of Irritation or Exhaustion; and by carefully obviating the effects already induced by them.

XLII. There is perhaps no morbid affection in which CAUTION, in the USE OF REMEDIES, in the REGIMEN, and in the NURSING, is so ESSENTIAL as in the present. In removing the cause of intestinal irritation, measures must be employed at once mild and efficient; otherwise, exhaustion on the one hand, and irritation only partially removed on the other, may prove the source of the greatest danger. It is equally essential to give nourishment, and to avoid loading or disordering the stomach. And the benefit of the wisest plan may be counteracted, by imprudent exposure to fatigue, exertion, hurry, agitation, or anxiety.

XLIII. Intestinal Irritation must be removed by aperient medicines and by enemata.

XLIV. With regard to the former, small doses of calomel, and draughts with rhubarb and sulphat of

magnesia, have appeared to me to be the best. One point is of the greatest importance; it is the union with the purgative, of a proper dose of opium, or of a stimulant medicine; and a point of little inferior importance, is the administration, before, during, and after, the action of the purgative medicine, of proper nourishment. With the calomel, I have given a small quantity of opium, and with the rhubarb and sulphat of magnesia, a little of the tinctura cardamomi comp.

XLV. It is impossible to say too much in recommending the use of enemata. By their means the intestine is unloaded effectually and without the exhaustion experienced from the action of efficient purgative medicine, and without disordering the stomach. It is, of course, needless to represent the importance of an exact inspection of the effect of enemata and of the purgative medicine administered.

XLVI. It is in the next place necessary to notice the means for obviating the various sources of exhaustion. If this be uterine hæmorrhagy, the following application is, I think, most effectual in arresting it. A lotion is prepared by dissolving from one to two drams and a half of sulphat of zinc in a pint of soft water; a scroll of linen is then made of a proper form and bulk to fill the vagina; this scroll is then fully imbued with the lotion, introduced into the vagina, and renewed frequently. The same lotion may also be applied externally.

XLVII. The other remedies which I have found useful, are the tinctura opii, the tinctura camphoræ comp., the sp. ammoniæ aromat., æther, wine, and similar remedies; in one instance, Case IV, opium, the extr. hyoscyami, and the carbonas ammoniæ were combined, with the best effect. A proper combination of these remedies, induces quiet sleep, prevents the exhaustion which would otherwise ensue from the administration of the purgative, and relieves many of the distressing symptoms of this alarming complaint.

XLVIII. Similar objects are obtained by the due administration of nourishment; this should consist of chicken broth, one part of milk and two or three of water thickened with arrow-root, &c. Something of this kind should be given, in small quantities, every hour or oftener, and especially as stated § XLIV.

XLIX. Such is the treatment which has appeared to me most beneficial in the general case of this malady. It is next a question, what should be done in the case of severe local affection and pain?

L. When the head is much affected, § XXVIII, a cold lotion, and fomenting the feet with hot water, are very useful. It may be difficult to determine whether leeches should be applied,—and still more difficult, whether recourse should ever be had to the lancet. I think leeches may sometimes be necessary, when

the complaint is the effect of irritation; but they can only palliate; and the affection of the head can only be removed by the removal of the *cause*, whether irritation or exhaustion. When the head is affected from exhaustion even leeches might appear improper. Venæsection must always be a very hazardous remedy, and ought, I think, to be proscribed in these cases altogether.

LI. Similar observations apply to the painful and tender state of the abdomen, or of the iliac or uterine region, which occurs in this affection. Enemata, purgative and opiate, fomentations of the part and of the feet, liniments,—and leeches,—are the remedies of greatest efficacy as well as safety. Venæsection only aggravates the pain, as it seems to do most of the effects of irritation, and may prove fatal to the patient.

LII. In the attack of jactitation,—of oppression of the breathing,—of palpitation,—of faintishness, &c. a draught with tinctura opii, sp. ammoniæ aromat., opening the door and window, fanning, bathing the temples with vinegar, the smelling bottle, and aromatic vinegar, are all important.

LIII. As a PREVENTIVE of such attacks great QUIET of mind and of body is of the utmost importance; company, talking, noise, &c. should be cautiously and repeatedly interdicted; the benefit of days of care may be undone in one moment of disturbance.

LIV. For the sickness, and indeed for all the uneasy sensations of this complaint, the effervescing mixture is of the greatest benefit.

LV. The patient's apartment should be kept cool, and free from every source of disturbance,—from too great light,—and from noise. In some cases I have recommended the eyes to be covered with the cold lotion, and the ears to be stuffed with muslin, as the best protections from glare and noise.

LVI. All this is peculiarly necessary whilst the patient is ASLEEP. And in those cases in which the sleep is disturbed and the moment of awaking is attended by great alarm and agitation, the sleep should be watched; if there be any agitation from dreaming or otherwise, the patient should be gently and cautiously awakened, and soothed and calmed if there should be alarm; and the best mode of awaking has appeared to me to be by offering a little nourishment, —the mind by this means being immediately collected to understand the state of things.

LVII. Much too may be done in the moments of alarm, agitation, palpitation, panting, &c. by judiciously trying to sooth and calm the patient, by just assurances of the degree of safety, &c.; and perhaps still more, by warning the patient, in the absence of the attack, that such attacks are still to be looked for, and that when they do occur, she must use every effort to compose herself.

ON A

SIMILAR MORBID AFFECTION

OCCURRING INDEPENDENTLY

OF THE

PUERPERAL STATE.

LVIII. AS the causes of Irritation and Exhaustion may occur independently of the circumstances of Delivery, or Miscarriage, so the affection in question may occur independently of the puerperal state, and, although more RARELY, even in the MALE SEX, and in INFANCY.

LIX. A deranged state of the stomach and bowels and Intestinal Irritation are incident to all periods and circumstances of life. The chief sources of Exhaustion which occur independently of confinement and miscarriage, are uterine discharges,--hæmorrhagy, menorrhagia, leucorrhœa; — protracted lactation; — diarrhœa; — purging; — bloodletting; — various diseases; —and the accessory causes enumerated from § VIII to XV.

LX. The different forms of this affection are as described, § XXI. It is more or less acute and serious in proportion to the degree of exhaustion.

LXI. This affection may arise originally from Intestinal Irritation, and Exhaustion. When it occurs during the *course* of some disease, it is, as I have stated in another work,* 'sometimes merely the effect of derangement in the digestive organs, and sometimes of the too copious action of a purgative, or of too copious bloodletting.'

LXII. From the same essay, I copy the following account of the symptoms of this affection, with such changes and additions as I find penned in the margin of my private copy.

LXIII. 'A frequent appearance of this affection is in the form of restlessness and jactitation;—there is an expression of anxiety, change of posture, throwing about of the arms, and a great appearance of oppression, hastiness, hurry and alarm,—often with eructations, faintiness, palpitation, panting, &c.

LXIV. There is sometimes delirium manifested by an unconnected expression, or of a more continued and active form. Sometimes there is pain of the head, throbbing, vertigo, intolerance of light, noise, disturb-

* See the essay on the Mimoses, Chap. v. The Mimosis Inquieta.

ance, &c. There is generally great susceptibility to impressions of every kind,—to agitation, hurry, fatigue, anxiety, attention, speaking, &c. Sometimes the patient awakes hurried, frightened, and with some alarming feeling. There is wakefulness, or hurried dreams.

LXV. At other times, there is hurry of the breathing, with heaving, sighing, panting, moaning, and catching, whilst there is the expression of great distress and fear in the manner of the patient, and an urgent desire for opened windows, fanning, the smelling bottle, &c.

LXVI. Sometimes there is a continued fit of dry, husky cough,—which appears as if it would finally exhaust the patient.

LXVII. In some instances there are fainting, fluttering, palpitation, and a sense of hurry and alarm in the region of the heart,—symptoms particularly apt to be induced on falling asleep, on awakening, on being startled, &c.

LXVIII. The pulse is apt to become frequent, and irregular and intermitting; during the palpitation it is bounding or thrilling; it is often of unequal frequency in different parts of a minute; and it is accelerated by the slightest cause.

LXIX. A continued spasmodic affection of some part of the body, a distressing hiccough, or similar symptom, has occurred in some instances.

LXX. All these affections vary in degree in the same and in different cases; they are observed to SUBSIDE, and to RETURN IN PAROXYSMS; and they are very liable to be REPRODUCED by any exertion of body or hurry of mind.

LXXI. When this affection arises principally from derangement of the digestive organs, it wears a less formidable aspect, and is attended with less frequency of the pulse, than in other instances. It is when its longer continuance appears manifestly incompatible with the existing state of debility and exhaustion, that the affection puts on all its terrors. The occurrence of this affection in the last stages of diseases, combined with the symptoms of sinking, is generally mortal.

LXXII. This affection must be carefully distinguished from Hysteria. It is far more serious. It is of the utmost importance to take into the consideration, the existing DEBILITY, EXHAUSTION, or DISEASE.

LXXIII. When this affection arises from a disordered or loaded state of the stomach or bowels, purgatives, followed, or accompanied by opiates, and

enemata, are the remedies on which most reliance is to be placed.

LXXIV. In the other cases, the tinctura opii, the sp. ammoniæ aromat.; wine; stimulating liniments; proper fluid nourishment, cautiously given with wine; bathing the face with cold water; the effervescing medicine; fanning, and a free air, are the principal remedies.'

CONCLUDING OBSERVATIONS.

LXXV. It has already been observed, that the effects of Intestinal Irritation and of Exhaustion are somewhat similar, and that the two causes frequently co-operate.

LXXVI. It is also of importance to observe that each of these causes seems to induce greater effect when the other pre-exists, than when operating alone. Thus Exhaustion is particularly apt to occur as an effect of the Loss of Blood, in cases of Intestinal Irritation.

LXXVII. The symptoms detailed in the preceding pages, as effects of loss of blood and of exhaustion, occur generally from a protracted or repeated operation of the cause;—especially the throbbing of the

head, the palpitation of the heart, &c. The effects of sudden and profuse hæmorrhagy are different, and do not need to be described. In the latter case the proper remedies are applied without hesitation; the former *appears* perhaps to arise *spontaneously*, and is not so manifestly connected with its *cause*, but is often mistaken for local inflammation, and often mistreated by remedies which co-operate with the exhaustion, aggravate the disease, and endanger the patient.

LXXVIII. It is also observable that in some instances bleeding has been borne better than could be expected, when its repetition has been hurtful or even fatal. In some instances the loss of a little blood has not appeared to do particular or immediate harm, but even to give relief; in others it has exasperated the throbbing, palpitation, or pain; and the practitioner has been led, by the apparent benefit confined, or by the apparent obstinacy of the affection, to a fatal repetition of the same measure.

CASES.

CASES.

SOME apology may be necessary for the manner in which several of the following Cases are drawn up. But without entering into any explanation, I beg to state, that if they have the effect of arresting in some degree an indiscriminate recourse to the LANCET, *and of fixing the attention on a set of affections requiring other and opposite measures, their intention will be fulfilled, and, I believe, the interests of* HUMANITY *promoted.*

SECTION I.

CASES TERMINATING FAVOURABLY.

CASE I.

MRS. A. was confined on Thursday, January 20th, 1820. The preceding day she had experienced inefficient, wearying pains. On Thursday morning the pains were strong, but the os uteri was found to be rigid; she was bled to eighteen ounces, and labour was soon afterwards completed.

Mrs. L. continued pretty well until Friday morning, when she became affected with shivering; this was repeated three times, occupying about three hours. The shiverings were succeeded by great heat of skin, and by great sickness, retching, and vomiting. An enema and purgative medicine were prescribed, much hardened fæces were expelled, together with fluid having the appearance of yoke of

egg,—and much relief was experienced. In the evening and night, however, there were great heat of surface; much restlessness, with constant changes of posture, and throwing the arms about and out of bed; the sleep was disturbed with startings and slight delirium; there were headach, confused vision, and much humming noise; and there was great faintishness on any attempt to assume the erect posture. She was directed to take the effervescing saline mixture.

On Saturday morning the sickness returned; the opening medicine had acted; there was considerable uterine discharge. A draught was given with thirty five drops of the tinctura opii.—I saw the patient about one o'clock. The pulse was then 144; there were headach,—intolerance of light, dim and imperfect vision,—and great humming noise in the ears; there was some beating of the carotids visible externally; restlessness,—changes of posture,—throwing the arms out of bed; faintishness if raised to the erect position; a feeling of want of air, and relief on smelling vinegar, &c.—A draught with thirty five drops of tinctura opii and a dram of the spiritus ammoniæ aromaticus, was ordered to be taken immediately and repeated in three hours' time; and a lotion consisting of a dram of sulphas zinci and a pint of water, was ordered to be applied to the pubes, and, by means of a scroll of linen, within the vagina. An opening draught was also prescribed but not given.

In the evening, the pulse was 130; there had been comfortable, refreshing, and undisturbed sleep; all the symptoms were abated; the bowels had been open; the uterine discharge was diminished.—A draught with ten drops of tinctura opii and half a dram of spiritus ammoniæ aromaticus, was ordered to be taken every five hours; the effervescing medicine was continued; the face and hands were directed to be washed with a lotion when hotter than natural, unless there should be chilliness or perspiration.

Early on Sunday morning there was an attack of troublesome coughing. It was relieved by a draught. At ten in the morning, the symptoms were as on the preceding evening; at night they were still further mitigated;—the pulse was 120, the bowels open, the uterine discharge scanty.

On Monday morning Mrs. A. complained most of general stiffness and aching pain of the limbs, and the pulse was 125. The opiate draughts were repeated, an opening medicine was given, and the lotion omitted. In the evening she was relieved, and the pulse was 120.

On Tuesday morning there was little complaint; the pulse was 108, the bowels open, and the lochial discharge natural.

CASE II.

MRS. B. aged 40, corpulent, and the mother of a family. She was delivered after a lingering labour on January 14th, 1820; the last pain was unusually severe, and of long duration, and appeared to induce great exhaustion. This was soon followed by a severe rigor which continued nearly an hour. An opiate was prescribed.

On the succeeding day Mrs. S. appeared to be tolerably well. An enema was administered, which induced an evacuation of scybalous fæces; and an opening medicine was prescribed.

On the morning of the 16th it was found that the rigor had recurred on the preceding evening, and was followed by great heat of skin;—the pulse was 120; there were great headach, intolerance of light, vertigo—the room appearing to be falling down upon her; there was severe pain of the loins; and much restlessness.—Leeches were applied to the temples; an enema was administered, and an opening medicine was prescribed.—A few hours afterwards the patient complained of having been much purged; the head was somewhat relieved; there had been much fainting; the pulse remained as before; the alvine evacuations were still hard; there had been all along considerable uterine discharge.

On the 17th and 18th Mrs. S. appeared better;—the effervescing medicine was prescribed.

On the evening of the 19th Mrs. S. got out of bed, and on again lying down, had a slight return of rigor, succeeded by severe pains in the loins resembling those of labour, and attended by considerable uterine discharge; she complained of vertigo, dimness of sight, and of a feeling of dissolution on raising the head from the pillow.—A draught with thirty five drops of tinctura opii, half an ounce of red port, and an ounce of water, was given, an enema was administered, and an opening medicine ordered.

On the 20th she had perspired freely, and all the symptoms were relieved; but there was still much intolerance of light.

From this date Mrs. S. experienced a gradual recovery.

CASE III.

MRS. C. aged 21, was confined on a Saturday in June, 1819, of her first child. During labour much scybalous fæces was passed. On the succeeding day an ounce and half of the ol. ricini were taken, and followed by five alvine evacuations.

There were no further evacuations, however, until the following Thursday, on which day it was found that she had been affected with feverish heat, noise in the head, vertigo, and a sense of fatigue, on the Tuesday and Wednesday; she was, when visited on the Thursday, sitting up, the countenance being flushed, the pulse 120 in the minute, with beating of the carotids, and much noise in the ears, as of a rushing wind, and of the explosions of crackers,—increased on lying down, and on shutting the eyes, when she also experienced flashes of light; she was perfectly sensible; the skin was hot and dry; there was much thirst; the respiration rather quick; the lochia and the milk were abated; the tongue affected with a thick, white load. There was no cough, palpitation, or pain. Fourteen ounces of blood were taken from the arm, which induced deliquium, before which, however, she expressed herself as feeling her head and sight relieved, and the pulse became much less frequent. A cold lotion was applied to the forehead, a blister to the neck, and powerful purgative medicines were given.

About seven hours afterwards, the pulse was 120, the noises in the head had returned, the pupils continued natural, the bowels had been scarcely moved. Twelve ounces of blood were taken whilst she was in the erect posture, and she again fainted. Five grains of calomel were given, and an enema with an ounce of sp. terebinthinæ was ordered.

During the night there were copious, dark coloured, and very offensive motions. At 7 a. m. on Friday, the pulse was 100, the head relieved, the skin cool, the tongue white and moist. The opening medicine was continued.

On Saturday she complained of slight pain at the back of the head, and of lowness; the pulse was 100; the cheeks a little flushed; there had been three alvine evacuations. Eight ounces of blood were taken from the arm, which like the former, exhibited the buffy coat. Leeches and a blister were ordered; and four grains of calomel and of the pulvis antimonialis, were given every four hours.

On Sunday morning the practitioner was called to her. There had been little sleep, but much lowness for several hours; the patient now complained of violent beating in the head, principally in that part which lay on the pillow; no pain; the pulse 120; the skin very hot; the tongue moist, loaded, and dark in the centre; the bowels had been open; a great expression of lowness in the countenance; the lochia and milk had ceased. A teacupful of blood was taken, which induced faintishness and abated the beating of the head. Six drops of the black-drop were given.

About noon she was flushed and the beating had increased. Six ounces of blood were drawn from the

nape of the neck by cupping; the calomel and antimony were continued; the prussic acid was prescribed.

On Monday the pulse was stronger but 130. Sinapisms were applied to the feet, and the medicines were continued.

On Tuesday the pulse was the same; she complained of her head feeling heavy like a brick, and felt as if "dying." A purgative dose of rhubarb and sal polychrest was ordered, and followed by seven drops of the black-drop. The effects of the opiate were, at first, dimness of sight, and alarm; but afterwards, refreshing sleep for several hours. An enema given when she awoke, produced fœtid evacuations. —In the evening she expressed herself as being much better, and begged for another opiate; the skin was hot, the pulse 130. Tepid ablution and a repetition of the opiate were ordered.

On Wednesday she had had several hours' refreshing sleep, awoke in a profuse perspiration, and said she was quite well; she had taken light nourishment; the pulse was still 130 and now irregular. The aperient and anodyne medicines were repeated.—She continued better in the evening, the sight and hearing being perfectly good, but the pulse as before. The medicines were repeated.

On Thursday she was better in every respect; the pulse was 120; the skin cool; the tongue cleaner; she was able to take light nourishment.

On Friday the pulse was 118. The alternate dose of aperient and opiate medicines had been continued; the skin was cool, and the tongue clean.—From this day the recovery was progressive.

This case is interesting from displaying the immediate and remote effects of even small bleedings in this complaint,—and the advantage of a change of this plan to that of alternate aperient and opiate remedies. It is presented without further remark, to the consideration of the reader, who will not fail to observe also, that this adds one to the number of cases, in which the buffy state of the blood affords no indication of the nature or for the treatment of the disease.

CASE IV.

MRS. D. aged 35, was confined on Friday the 11th of June, 1818. For several weeks previously to delivery, she had been subject to pain of the head, and of the left side;—which were relieved by an attention to the state of the bowels.—After the expulsion of the placenta there was considerable hæmorrhagy, which induced great exhaustion; two doses of forty drops of tinctura opii were given within two hours, with the effect of producing sleep. The secre-

tion of milk commenced on the same day, and was very copious.

About three hours after delivery, Mrs. D. was seized with a violent pain on the crown of the head, confined to a space which could be covered by the hand; the pulse was 80 only; there was much thirst; the tongue was little affected: the skin was natural. This pain was relieved by the cold lotion, and opening medicines, and Mrs. D. continued tolerably well during ten days.

On the night of Monday, June 21st., she was taken about 12 o'clock, with severe shivering, which was succeeded by intense heat and dryness of the skin, great pain of the head, and intolerance of light and of noise. At 10 o'clock on Tuesday morning, the 22nd, these symptoms still continued;—the pulse was from 120 to 130 and sharp; the pain of the head was throbbing, and the head felt as if bound tight; the tongue was parched. Ten ounces of blood were taken from the arm, which produced temporary faintiness,—but some relief; the cold lotion was applied to the temples.—At 7 o'clock in the evening, the pain of the head was as severe as ever, especially if the lotion were not constantly applied; the pulse was 120; the tongue not so dry; the blood already drawn was buffy. Twelve ounces of blood were taken from the arm. This was followed by great faintness, gasping breathing,—to such a degree as to lead to the apprehension

of dissolution even;—on recovery, the pain, and intolerance of light and sound remained as before; the pulse rose to 130. Leeches were applied to the temples and the cold lotion over the head; two grains of calomel were ordered every two hours; and an opening mixture and an enema were prescribed.

At four o'clock of the succeeding morning, Wednesday, the 23rd, the symptoms continued with little change; the pulse was 120; there was much gaping. Six leeches were applied to the temples, a blister to the nape of the neck, and the medicines were continued.

On Thursday morning, the 24th, the pulse was 100 and she appeared better, but complained of a degree of beating of the heart. At four in the afternoon the pulse was 120, the breathing was deep, sighing, and seldom, and there was a sense of fluttering at the heart, the affection of the head still continuing. Two grains of opium and five of calomel were ordered.

At 2 o'clock on Friday morning, Mrs. D. was distressed with a feeling of hurry, of impending dissolution, and of being "overcome" by sleep; the pulse was 120; and there were sighing and interrupted breathing. At 11 o'clock she was more comfortable, —the pulse was 100; there was less pain of the head and of intolerance of light and sound,—less sighing,— and less faintishness; she had been able to sleep for

ten or fifteen minutes without feeling overcome; there was some fluttering.

From this day the amendment was progressive though slow. On June the 29th the following report was made. There have been some pain of the head, fluttering, faintishness, feeling of dissolution, sighing breathing, restlessness, &c. at different times, but less than on the 25th; the skin has been in general hot, but once moist; the pulse about 100; the bowels rather disordered, and the stools dark and offensive.

A similar report was made on July the 3rd. It is also stated that the pulse was easily hurried, that there was an evident movement of the abdomen from the action of the aorta; and that there had been occasionally hurry and alarm during sleep.

On July the 7th. it is reported that Mrs. D. is greatly susceptible of the effects of corporal exertion or mental emotion, which induce hurry, throbbing, palpitation, &c; and there are still some throbbing or pulsation observed in the neck and about the heart; some tendency to sighing breathing, faintishness, &c; there is also a return of the pain under the left breast experienced during the later period of pregnancy.

On July the 16th, there were still throbbing and palpitation on any exertion, and hurry on the slightest occasion; lowness and faintiness; starting and

hurry on falling asleep and on awaking; and a visible pulsation of the abdomen.

From this period until the 4th of August Mrs. D. continued to recover in the most favourable manner, when she again experienced a degree of shivering, heat, and pain of the head and of the side. The medical attendants were called;—the pulse was 104; the skin hot; there were pain of the head; the feeling of dissolution on falling asleep; fluttering; faintishness; repugnance to food; severe but ineffectual retching; the flow of milk lessened; no vaginal discharge. She could not bear to sit up, the window was wide open, a fan and smelling bottle lay on the bed, and the candle was shaded. The bowels had been moved and some dark and fœtid motions passed.

The anorexia had existed for some days, the bowels had been disordered, and Mrs. D. had parted with Mr. D. who was gone a journey,—circumstances which had appeared to produce this attack. A brisk purgative was ordered, and a draught with tinctura opii, spiritus ammoniæ arom. and æther, was ordered to be taken, if the operation of the purge should render it necessary.—In the evening, I found the medicine had induced four or five alvine evacuations, which were free from fœtor or even odour. The feeling of faintiness continued, and the pulse was extremely uncertain in frequency, varying from 84 to 100 in a minute; there were frequent deep sighs, and almost

gasping, with loathing, nausea, and occasionally severe retching. Some beating about the chest, some restlessness, and considerable tremor. She took a little dry toast, a little weak brandy and water, and a little porter, and was ordered half a grain of opium, two grains of carbonas ammoniæ, and three of ext. hyoscyami, to be taken every three hours. This induced much sleep, the first part of which was attended with the same feeling as before, but the latter greatly refreshing, and on the morning of August the 5th, she was in every respect better.—In the evening she was still better, but complained of oppression, which was attributed to the extreme closeness of the evening. There had been one fæculent motion.

On August the 6th. Mrs. D. was very much better. There had been a dark, fœtid, alvine evacuation.

From this time the recovery was progressive, rapid, and permanent, and the patient continues to enjoy a good state of health, with the exception of a disordered state of the digestive organs.

CASE V.

MRS. E. aged 44, mother of a large family, became pregnant about the beginning of October 1818, and from that period was subject to sickness and a very irregular state of the bowels,—constipation continually alternating with diarrhœa. About the ninth

week after conception there was a flow of fluid by the vagina which did not coagulate; this flow continued a week, then ceased, but afterwards returned and continued, with the exception of two or three days, until at length the discharge formed into coagula, and abortion took place five weeks after the first flow.

Subsequently to this event there were weekly returns of uterine hæmorrhagy, which continued for about two days, and then ceased, again to recur after an interval of about five days.

Before and after the abortion, Mrs. E. experienced much tremor, faintishness, and fluttering, and was unable to bear any noise or cause of hurry. These symptoms were aggravated more and more at each recurrence of the hæmorrhagy, which was always preceded by tumidity and a sense of fluttering about the abdomen, and by a peculiar inability to bear any noise or hurry, which always induced the feeling of approaching dissolution; after the loss of blood there were also severe pain of the forehead, and palpitation of the heart, with tendency to syncope, chilliness, sense of want of air, &c. These symptoms became more and more distressing and serious at each return. The feeling of impending dissolution was so dreadful at length, that, as the patient expresses herself, not only noise and hurry, but even "thinking" was too

much for her; and the subsequent affection of the head, &c. became very alarming.

I saw Mrs. E. on February the 22nd. She then complained of severe pain and heaviness of the head, with vertigo on raising herself from the pillow, of deafness with a humming noise and beating in the ears, and of dimness of sight. She had been very wakeful; but on falling asleep at any time, she awoke hurried, alarmed, and overcome, and experiencing a sense of dissolution; or if she continued to sleep she was much disturbed by frightful dreams. She had much palpitation of the heart, with fluttering, and a very irregular and intermittent pulse; these symptoms were so much aggravated by any noise or disturbance, as to induce the feeling of impending dissolution, or as the patient expresses it, of "instant death." There was also great tendency to syncope; requiring the window to be opened, the face to be washed with vinegar, and the smelling bottle to be applied to the nostrils;—no other smells, however, could be borne. There was no nausea or sickness. The bowels had all along required purgative medicines, and the alvine evacuations were copious, dark-coloured, and fœtid. There was much loud rolling of the bowels. No pain of the side, or uterine region. There were great pallidness, and loss of flesh.

The affection of the head and other symptoms were not only aggravated, but distinctly reproduced,

by each return of flooding, and the patient was always enabled to foretell the recurrence of hæmorrhagy by her feelings of internal abdominal fluttering and fulness, and the effect experienced from noise and disturbance.

I prescribed a lotion consisting of two drams of the sulphas zinci dissolved in sixteen ounces of water, to be inserted by means of a scroll of linen, into the vagina,—purgative medicines, and the saline effervescing mixture. The lotion suppressed the hæmorrhagy, of which she had only one recurrence, and she recovered most speedily and favourably.

CASE VI.

MRS. F. aged 40, mother of a family. September 25th. 1819. Three weeks ago, when much weakened by long suckling, she began to have the catamenia. In a week's time they passed into discharges of blood, which continued several days. The bowels were, in the mean time, costive. At this period Mrs. F. became seriously indisposed with the following symptoms:—

There was much heat of skin; great pain and throbbing of the head; wakefulness and starting from sleep; agitation and perspiration from any sudden noise, as a nock at the door; shortness and op-

pression of the breathing; great want of air; faintishness; some sickness and flatulency; the pulse was 120; there was a constant desire to have the face washed with vinegar; the bowels were costive and the motions offensive.

These symptoms gradually declined under the use of purgative and anodyne medicines.—Once there was a spasmodic affection which moved the lower jaw in a rapid and singular manner.

CASE VII.

MRS. G. aged 40, of a robust constitution. May 18th. 1818. She miscarried about a fortnight ago. Her indisposition appears to have been provoked by mental agitation. At present she suffers from the following affections:—The countenance and manner are not very anxious, but she experiences and manifests a perpetual restlessness, and says that she feels as if she should be relieved by getting up and running about the room. She requires to be continually fanned. There is great wakefulness. The pulse is 150. There are sickness and retching, especially on moving.—These symptoms continued for some time, and were several times aggravated, probably by mental agitation; but they ceased gradually by the use of carminative purgatives.

CASE VIII.

MRS. H. aged 38, and delicate. During pregnancy she had laboured under dysentery by which her strength was much reduced. Her labour was easy. On the succeeding morning she was as well as usual at that period. In the evening she became affected with rigor, and with pain of the abdomen, especially of the left side near the groin. On the ensuing day, the countenance was pale and shrunk, there were severe pain of the head, intolerance of light, beating of the carotids, continual want of air, great pain and tenderness of the left side of the abdomen, sickness and vomiting, the pulse was 120, the tongue dry, the mammæ distended. One grain of opium and six of calomel, were given, and followed by a purgative mixture; the mammæ were drawn, and a liniment was rubbed on the painful part of the abdomen; fluid nourishment was recommended.

In the evening the symptoms remained nearly as before; the left side of the abdomen was painful and tender under pressure; the medicines had moved the bowels freely. Leeches followed by a poultice were directed to be applied to the painful part; and the saline effervescing medicine was prescribed.

On the succeeding morning Mrs. H. was much relieved, the abdomen being less tender under pres-

sure; there was still much pain of the head, which could not be raised from the pillow without inducing vertigo; there was still intolerance of light; and although the weather was cold and the room cool, the patient complained of want of air and of faintishness. A cold lotion was applied to the forehead, the aperient medicine was repeated, the liniment applied as before, the effervescing medicine continued, and a draught with thirty five drops of tinctura opii was directed to be taken at bed time.

On the next day, the patient reported herself as having passed a better night; the symptoms were all mitigated; she had, however, been affected with vertigo and a troublesome dry cough;—the pulse was less frequent; the pain of the head and abdomen relieved; the tongue moist.

From this time Mrs. H. was gradually convalescent. There was sickness sometimes; but this, and any other symptom, was removed by an attention to an aperient medicine the effervescing mixture, and opiate draughts or enemata given at bed time.

CASE IX.

MRS. I. was much weakened by an abortion about a year ago; her present labour was easy; and there was nothing to lead to particular apprehension except

an extreme paleness of the countenance and delicacy of constitution. After confinement she complained of pain of the loins and of the abdomen, which was somewhat relieved by an anodyne draught.

On the day after her confinement, she still complained of the pain; a dose of calomel and an opening medicine were prescribed. In the evening she experienced a degree of rigor, and—

On the succeeding day the general surface was hot, there were pain of the head, and intolerance of light, and of noise; the abdomen was not tender; the pulse was 130. A grain and half of opium, and five grains of calomel, were given, and followed by a purgative mixture, and the effervescing medicine; the feet were fomented with hot water, and fluid nourishment was ordered.

On the following morning Mrs. I. appeared better, and the symptoms were relieved; there were occasional sickness and vomiting, and some pain on the region of the uterus, that of the loins being relieved. An anodyne linament was ordered to be applied to the painful part.

The patient recovered favourably by taking the aperient and effervescing medicines and an occasional opiate at bed time.

CASE X.

MRS. J. aged 23, pale, and delicate; had considerable hæmorrhagy during labour,—of her first child; the consequent debility was gradually removed, and Mrs. J. experienced no particular indisposition until 18 days afterwards, At that time she was seized with pain in the loins, and a severe rigor which lasted half an hour, followed by heat of skin, frequent pulse, and increase of pain in the loins. An enema was administered, and a grain and half of opium and four grains of calomel, and a purgative mixture were prescribed. The operation of the enema induced a copious fæculent evacuation with much relief of the pain; the medicine acted frequently.

On the ensuing morning the skin was hot, the tongue dry; there was pain of the abdomen, and some tenderness under pressure. The effervescing saline mixture, and a liniment, were prescribed.

The pain of the loins and of the abdomen gradually abated. But the patient was affected by a distressing cough; this symptom also gradually declined.

Three or four days after the attack of this affection, the mouth and throat became affected with aphthæ. The opening and saline medicines were continued, and the patient gradually recovered.

CASE XI.

MRS. K. aged 34. November, 1818. Labour began an the 20th instant, but proceeded slowly, and the os uteri was not fully dilated until the morning of the 24th, at which time it was thought proper, from the inefficiency of the pain and the exhaustion of the patient, to deliver by means of the forceps. There had been, from the obstinacy of the patient respecting the treatment, no alvine evacuation during the long period of labour. On the morning of the 26th there was a costive motion; in the evening a dose of calomel was administered, and an aperient draught was prescribed.

On the morning of the 27th. Mrs. K. was extremely ill. The draught had been neglected. She complained of headach, and of want of sleep; there were a vacant stare, quickness in speech, an appearance of hurry and alarm in the countenance, and tremor of the muscles of the face; there were much heat of skin and profuse perspiration; the pulse was 120 and tolerably strong; she begged that the windows might be opened, complaining of want of air; she also experienced much pain of the loins and iliac region, and in this region there was some tenderness under pressure. She had taken tea principally.—Under these circumstances, thirty drops of the tincture

of opium were prescribed, and followed by four grains of calomel and a purgative mixture.

In the evening Mrs. K. expressed herself as feeling better; but the purgative had not operated.—An enema was ordered to be administered immediately, and the purgative to be continued.

On the morning of the 28th. Mrs. K. was much relieved in every respect. The enema had induced most copious offensive evacuations.—The purgative medicine was continued.

On the next day Mrs. K. complained of want of sleep, and there was an appearance of restlessness.—An opiate and a repetition of the purgative medicine, were ordered.

From this time Mrs. K's recovery was progressive and unvaried.

CASE XII.

MRS. L. aged 36. This patient was visited on January the 13th, 1819, two days after her delivery of her third child. She was affected with excruciating pain, great tenderness, and general tumidity of the abdomen, the pulse was 150 and small, and there were great general irritation and exhaustion.

On inquiry it was stated that Mrs. L. had suffered from severe attacks of pain with diarrhœa, during the last five weeks of pregnancy; her labour was natural, but was succeeded by severe pain.—An enema with two drams of tinctura opii, was directed to be given, and a liniment to be rubbed over the abdomen.

In about three hours, Mrs. L. was again seen. The enema had given some relief to the pain, and the pulse was somewhat less frequent.—Four grains of calomel and one of extractum opii, a purgative mixture and a large domestic enema, were prescribed.

By these medicines copious evacuations of hardened fæces were produced, and the patient remained nearly as at the last visit.—The medicines were repeated on the evening of the 14th.

On the morning of the 15th. it was found that more scybalous fæces had been passed; there were still great pain and tenderness of the abdomen; during this day an attack of vomiting came on and the patient seemed much exhausted by it; the pulse became still more frequent.—Half a grain of opium was directed to be given every five hours, and the effervescing medicine was prescribed.

These remedies procured the desired relief, and Mrs. L. continued better and improving for several days. But on the evening of the 19th she became

much worse, and on being visited was found in a state of restlessness and sinking,—the pulse not admitting of being counted, the hands and feet being cold, clammy, and livid, and the countenance ghastly. —Opiates and gentle stimulants, nourishment, and every means of sustaining and restoring warmth, were recommended.

In the evening Mrs. L. was somewhat revived.— An enema was prescribed.

On the morning of the 20th. there was more warmth, and the pulse was more perceptible; the enema had evacuated some scybalæ.—During the last several days the mouth and throat had became covered with aphthæ.—Half a grain of opium was given occasionally, and the other remedies continued.

The alvine evacuations became natural about the 24th. On this day there was an attack of diarrhœa with motions of a natural colour, which was suppressed by opium. A pain in the right iliac region, which had still remained, gradually diminished from this time by simply employing the liniament,—the opiate and the aperient medicines being continued.

From this date Mrs. L. recovered slowly, but progressively and favourably. Saved by the particular treatment adopted, would she not have fallen a victim to the use of the lancet?

CASE XIII.

MRS. M. aged 24, subject to habitual constipation, with sallowness of complexion and dark rings round the eyes, frequent headach, and pain of the sides of the abdomen.

The day after delivery she became seized with violent pain and tenderness of the umbilical and hypogastric regions;—the surface was hot and moist with perspiration, the countenance flushed, with restlessness; the pulse was 90 and full.—A vein was opened, but when eight ounces of blood had flowed, the pulse had increased in frequency to 120, and the orifice was closed.

The pulse remained at 120 until a draught containing forty drops of the tinctura opii began to produce its effect on the system. The patient then slept, and on awaking was free from the pain with a pulse at 80.

Attention being paid to the state of the bowels, Mrs. M. recovered favourably.

CASE XIV.

MRS. N. aged 30, a lace-mender, and subject to habitual constipation;—during labour she had taken

a quantity of spirit which induced great general excitement.

On the first day after delivery, there was much perspiration, the pulse was 100, the mammæ turgid, the lochia not profuse, the bowels open.

On the second day the pulse was 90, the milk copious, the lochia suppressed.

On the third day the pulse was 120, the surface was hot, there were great restlessness, severe pain of the head, dull aching pain of the right hypochondre extending to the back, and tumidity of the abdomen; the bowels confined. Fourteen ounces of blood were taken from the arm, which induced faintiness; and leeches and cathartic medicines were prescribed.

On revisiting the patient, the pulse was found to be 140 and intermittent; there was great apparent exhaustion, the sight and articulation were defective, and there was some incoherency of ideas.—A draught was prescribed containing ten drops of the black drop.

The patient slept, and awoke tranquil, and the pulse was 110 and regular. The pain of the side and of the back continued; the abdomen was tumid, and the last alvine evacuation very offensive.—A draught containing a dram of the oleum terebinthinæ was prescribed to be taken every hour until the bowels

should be freely moved, and then the opiate draught to be repeated.

These remedies were given alternately during the two succeeding days.—The pulse fell gradually,—being sometimes intermittent,—but always regular during the effect of the opiate.

The patient became convalescent, and still remains very well.

CASE XV.

MRS. O. aged 25. July 19th. 1819. She has been subject to the Mimosis Decolor, with great pallidness of countenance, for several years. During pregnancy she suffered much from pain of the side. She had a profuse discharge after delivery, and on the third day was taken with severe headach, and pain in the region of the uterus, with great heat of skin.

Mrs. O's indisposition continued three weeks. The pain of the head was severe and accompanied with great beating, and evident throbbing of the carotid arteries. There were fluttering about the heart, and faintishness, and she constantly required much fresh air, and the smelling bottle. The throbbing was much increased by any muscular effort, and the fluttering by the slightest surprise.

Mrs. O. recovered slowly by taking alternate purgative and opiate medicines, but still remained in the pale and feeble state which obtained before pregnancy.

CASE XVI.

MRS. P. aged 24, was affected with continued and profuse uterine hæmorrhagy after delivery, for many weeks. The countenance became, in consequence, extremely pale and exanguious, as well as the hands and general surface; the pulse became frequent, and bounding; the head affected with throbbing pain, and, afterwards, the heart with beating, the action of the carotids being very evident to the eye and to the finger; the tongue was furred and and affected with large and prominent papillæ; and the alvine evacuations were very fœtid.—Mrs. P. recovered much from taking opiate and aperient medicines, and on being allowed a little ale.

In this state of convalescence, Mrs P. was extremely alarmed and agitated by the occurrence of a storm of thunder and lightning, and became affected with excessive diarrhœa, hurry and palpitation of the heart, the pulse being too frequent to be counted, —and threatening of dissolution.—This state was relieved by opiates.

On the succeeding day the countenance was again exanguious, the pulse extremely frequent, the caro-

tids beat violently, and there were great hurry, faintishness, and debility; the appetite, which had previously returned, again failed; the bowels were open; there was pain from retention of urine; no uterine discharge.

From this time Mrs. P. recovered favourably, on using the same medicines as before.

CASE XVII.

MRS. Q. aged 28. After delivery there was profuse hæmorrhagy, which continued to recur for twelve subsequent months. It was at length discovered that Mrs. Q. laboured under *polypus uteri*;—a ligature was applied, purgative medicines given, and the patient presently recovered.

The case is introduced in this place, in order to present the detail of symptoms which arise from profuse, continued, or reiterated loss of blood. There were, 1. vertigo, dimness of sight, singing in the ears, beating of the temples, "knocking" of the head; 2. faintishness, syncope, fluttering and beating of the heart, fear of dissolution, frequency of the pulse, pulsation of the carotids, and of the aorta,—sometimes so as even to move the bed clothes; 3. hurried, panting, sighing, and short breathing; 4. want of air,—opened windows,—the smelling bottle,—bathing the nostrils and temples with sal volatile or

vinegar; 5. terrific dreams, starting in the sleep, wakefulness, heaviness for sleep in the morning with great yawning and stretching of the limbs; 6. on awaking the heart sometimes beat so violently as to shake the bed and even the door.

There were great pallor of the countenance, prolabia, and tongue; and some œdema of the legs.

The bowels were irregular; once there was obstinate constipation; frequently the bowels were confined, with an aggravation of all the symptoms; sometimes there was sickness. The alvine evacuation was offensive and dark-coloured.

I shall conclude this Section by giving the following Case from Dr. Denman's Treatise on Midwifery, subjoining a few remarks in which, I think, the reader of the preceding Cases cannot fail to coincide:—

CASE XVIII.

"But though women, who have had profuse uterine hemorrhages at the time of delivery, are particularly liable to the puerperal fever from this or some contingent reason; and though it is seldom removed by spontaneous hemorrhages, yet these are sometimes critical. The following case was communicated to me by Dr. *Joseph Denman*."

"I was called in the middle of the night to go ten miles to a woman, whose *placenta* had been retained many hours after the birth of the child. The want of courage to withstand solicitation, and the distance from me, were my reasons for undertaking to separate it. The *placenta* adhered strongly, but the separation was made very gently, and without any considerable hemorrhage. On the third day, the patient was seized with a shivering and fever, which continued all night. From this she was relieved by so large a discharge of blood from the *uterus*, that I was again sent for on that account. There was no swelling of the *abdomen*, but great tenderness, much pain in the head, constant thirst, a little delirium, and she had no stools. An increase of fever every evening, and the same profuse discharge every forenoon, continued for ten days. She took occasional testaceous powders with rhubarb, saline mixtures, tincture of roses, infusion of bark, and some doses of opium. She at length recovered."

"The hemorrhages seem in this case to have been absolutely critical."

Dr. Denman supposes that the attack of each evening was, in this case, removed by a critical hæmorrhagy the following morning. Is it not, on the contrary, far more probable that the morning hæmorrhagy occasioned the evening exacerbation of symptoms, as we have observed in so many other cases of hæmorrhagy

or of loss of blood, and that the cause and the effect were mistaken for each other? What, otherwise, could be the cause of a daily exacerbation of symptom for ten successive days? Does not this case, indeed, essentially coincide with Case V?

The first cause seems to have been internal hæmorrhagy, the effect of separating the placenta; this induced shivering and fever, the bowels being constipated; then there is profuse external hæmorrhagy with urgent symptoms,—pain in the head, delirium, tenderness of the abdomen, constipated bowels; lastly, recurrence of hæmorrhagy in the morning and exacerbation of the symptoms in the evening, for ten successive days.

Could this case be an instance of puerperal fever properly so called? I leave the consideration of this question, and the inferences naturally to be drawn from it, to the judgment of the reader.

REMARK.

The first, second, third, fourth, fifth, sixth, and seventh cases appear to unite, in different degrees, the effects of intestinal irritation, and of exhaustion; in the eighth, ninth, tenth, eleventh, and twelfth, the symptoms of intestinal irritation predominate; and the fifteenth, sixteenth, seventeenth, and eighteenth, display the symptoms of exhaustion and of loss of blood;

lastly, the third, the fourth, the thirteenth and the fourteenth, display the effects of venæsection in some instances of this affection in which this measure was improperly employed. Would that the pernicious effects of this practice were always such as to afford so early and distinct warning of its baneful and fatal tendency! Too frequently, alas! this measure, by aggravating the primary symptoms, only suggests the idea that it requires to be employed in a still more decided manner.

SECTION II.

CASES TERMINATING FATALLY.

CASE XIX.

MRS. R. aged 35. For six weeks previously to delivery she had been affected with uterine hæmorrhagy varying much in degree. The bowels were in a constipated state. About 7 o'clock in the morning of the 16th of September, 1819, she was affected with slight labour pains, and with increased flooding. At 10 o'clock an accoucheur was called to the assistance of the midwife; the countenance was extremely pale, and the pulse frequent and feeble. Sixty drops of the tinctura opii were given in a little port wine and repeated twice in brandy and water, but they were always rejected by vomiting; this medicine was at length retained on the stomach on being given in water. When the patient was a little recovered, an examination was made per vaginam; the os uteri was somewhat dilated, the os externum more rigid

than usual in such cases, the vagina plugged with coagulated blood—the flooding having much decreased. The hand was cautiously introduced into the uterus; the placenta was situated over the os uteri, and was separated in about one half of its area; delivery was effected with less difficulty than was anticipated; the contractions of the uterus had been and were still inconsiderable. After delivery she expressed herself as feeling comfortable, and better than she could have expected.

The patient continued well until the evening of the succeeding day, the 17th., when she was seized with shivering, which was followed by great heat of skin, with a very frequent pulse. A purgative of calomel, followed by a draught with rhubarb and sulphat of potassa, was administered.

In the morning of the 18th Mrs. S. was apparently much relieved. But in the evening an urgent message and call were received. She appeared alarmingly ill, the pulse was 148; there was much violent beating in the head, of the carotids, and of the heart; she required fresh air, and the smelling bottle; and she was much relieved by bathing the temples with vinegar and water; there were general pain of the abdomen, and some tension and flatulency. Six grains of calomel were prescribed, and half an ounce of the oleum terebinthinæ was ordered to be repeated every hour and a half until it should operate.

On the morning of the 19th. it was reported that the calomel and one dose of the oleum terebinthinæ had been taken, and had been followed by sleep; the pain and tension of the abdomen were less; the bowels had been moved several times; the pulse was 130. —Another dose of the oleum terebinthinæ was directed to be taken. A few hours afterwards the patient complained of being much exhausted by the purgative operation of the medicine. The effervescing medicine was ordered and appeared to give much relief.

On the 20th. the relief still continued. The pulse was about 130; the beating of the carotids less; and the abdomen was free from pain and flatulency.

On the 21st. Mrs. R. remained much the same; but the pulse was 140; she had taken light nourishment; there had been six alvine evacuations.

On the 22nd the symptoms were aggravated, and Mrs. R. expired in the afternoon.

During the course of this case, there were repeated shiverings, generally after intervals of twelve hours. These were followed by much heat of skin. At different times there was slight delirium, and generally unusual quickness in the manner and in speaking. There was great wakefulness, or if the patient did fall asleep, it was for a moment or two only, and

she awoke alarmed and agitated. Besides the symptoms noticed on the evening of the 18th, there was also a degree of panting and of deep breathing, somewhat resembling that of a person recovering himself after being out of breath.

An examination of the thorax and abdomen was permitted. All the viscera were found in the most healthy state. There was a little serous effusion into the general cavity of the abdomen.

CASE XX.

MRS. S. aged 28, of pallid complexion and delicate habit. For some time previously to delivery she suffered from aphthæ, with irritability of the stomach and bowels; there was also some œdema of the ankles and of the face.

After delivery there was a considerable flow of lochia; the tendency to diarrhœa continued, with light yellow fœtid stools; and the pulse was frequent. The countenance was extremely pale; and there was great pain of the head, fluttering, and tendency to faintishness.

Soon after delivery, the aphthæ which had somewhat disappeared, were again observed on the inner part of the under lip, in the form of vesicles clustered

together, and one or two were situated on the tongue, which was clean and pallid. The face was pale, the prolabia exanguious; there was repeated bleeding from the nose,—the blood becoming pale and aqueous; there was frequent pain of the head; the pulse was frequent,—often 110; the bowels loose.—She was much relieved by taking the tinctura opii, pure opium, the pil. hydrarg. &c.

On the 24th of May, 1819, twenty days after delivery, and after a gradual amendment for a fortnight, she experienced, in the night, a fit of palpitation of the heart, which, however, soon went off.

On the 26th, Mrs. S. had taken a little mutton, and her room was particularly close; under these circumstances she became affected with great anxiety and agitation, an overwhelming internal feeling not to be described, and tendency to fainting,—all increased on attempting to be moved; the pulse was small, and 156; the heart, carotids, and, indeed, the head, chest, and bed-clothes, were affected with throbbing and palpitation.—Thirty drops of the tinctura opii were given, and repeated with great relief.

The next day, the 27th, the pulse continued at 132, and the movement of the heart, carotids, head, chest, and bed-clothes, was still great; the pulse was fuller, the general expression and feelings more tranquil. There had been some sleep; but on awaking,

there was a temporary confusion of mind. The bowels had been gently moved by the Rochelle salt.

On May the 30th, the symptoms remained nearly the same. The pulse 140; the beating of the carotids still visible; the palpitation greatly increased, and faintishness induced, on moving. The countenance was pale and rather tumid; the tongue and teeth appeared as if besmeared with syrup, and the breath had the odour of new-milk; the bowels were confined; the urine plentiful. No tenderness of the abdomen, cough, or headach, or tendency to complain.

May the 31st. A mild purgative and an enema were administered yesterday, and evacuated large portions of hardened fæces, after which a draught with thirty drops of tinctura opii was given. The pulse fell to 100; and all the symptoms were mitigated.—In the evening the pulse was about 104; there was still a little throbbing of the head, but the palpitation and beating of the carotids, were much diminished; the bowels unmoved to-day; urine plentiful; fluunt catamenia. No pain or tenderness of the abdomen.

June the 3rd. Since the last report, there have been repeated attacks of sickness and vomiting, with more throbbing of the head, carotids, and heart; and the alvine evacuation has been occasionally costive. To day, the countenance is pallid and more swollen with œdema; there is throbbing at the occiput, with pain,

and beating of the heart and carotids; a degree of labour in breathing, and cough; tenderness of the epigastrium, sickness, and constipation. The manner appears rather changed;—speaking requires greater effort; there is greater hurry and exhaustion; and greater repugnance to food and medicine.

June the 7th. Since the 3rd. the principal symptoms have been sickness and vomiting, medicine having been quite rejected, and sometimes food. There has been once or twice deepish, and a sort of blowing breathing,—apparently implying a sense of want of air; there is an occasional hacking cough; some throbbing of the head; the pulse has been from 100 to 110. The countenance is pale, but the lips have a little more colour. There is much loss of flesh. The bowels have been kept open; the appetite is better. There has been good sleep.

June the 8th. The countenance is much as before; there is less throbbing in the head; no delirium; pulse 108 and rather irregular; some sighing and taking of a deep breath,—hacking cough,—sickness and vomiting; some tenderness of the right hypochondrium, and beating of the abdominal aorta.

June the 9th. Less throbbing of the head; pulse 116; much pulsation over the aorta; the sickness has recurred several times.

June the 10th. This evening there is increased sickness, with dyspnœa consisting of deep, sighing breathing; pulse 120; the throbbing, palpitation, and pulsation of the abdominal aorta, are less; no cough noticed; the sickness continues; the bowels open twice.

June the 11th. The deep breathing has been very urgent. The nose is cold and livid; the lips dry; the eyes deathly; the pulse 100 and feeble.—Mrs. S. expired on the 12th. about 2 p. m.

On examination, on the the 13th. at noon, three or four ounces of water were found in each cavity of the pleura, and one ounce in the pericardium. In every other respect, the thoracic and abdominal viscera, were most healthy. The heart, the stomach, the bowels, and the liver, were free from the slightest appearance of disease. The uterus was collapsed to its natural size.

CASE XXI.

MRS. T. aged 40. The following report was made ten days before her confinement. She has long been subject to the Mimosis Decolor; at present the complexion is pale and yellowish, and the prolabia, gums, and tongue exanguious; the face is apt to become rather puffed and swollen; the tongue is clean,

formed into lobules, and of a pale lilac hue; the hands and general surface are also pale and exanguious, and the skin dry; the hands a little swollen; the nails are extremely pale; there is less pain of the head than formerly,—some fluttering at the heart, and pain of the side; the bowels are kept open.

After this report the tendency to anasarca augmented, and the face, hands, legs and thighs became very much swollen.

Mrs. T. was confined on May the 3rd, 1816, of a fine boy. After delivery Mrs. T. complained of pain over the coronal suture; the pulse was 120; there was some difficulty in breathing; and there were sickness and vomiting.—Four ounces of blood were taken, which formed into an extremely small crassamentum with much serum; attention was paid to the bowels, and to the state of lowness and exhaustion of the patient.

Mrs. T. became gradually more and more affected with hurry and heaving of the breathing, fluttering at the heart, frequency of the pulse, faintishness, want of air, &c. which symptoms gradually increased until she expired.

All examination was refused.

CASE XXII.

This case is given, although imperfect, because it presents the series of spasmodic affections which arise in some instances, as effects of great irritation and exhaustion.

MRS. U. aged 25, was reduced before confinement by two bleedings necessary to subdue an inflammatory complaint. After delivery she was affected with symptoms of puerperal fever; she was bled three times, the bowels were much disordered and the motions extremely offensive; the countenance was pale and the pulse extremely frequent, varying from 132 to 144; the pain of the abdomen ceased.—In this state the following affections supervened. The first was a catching in the respiration with a protrusion of the pomum adami; then an attack of dry, husky, and repeated coughing; and an appearance of general agitation. This affection was removed by giving thirty-five drops of the tinctura opii. On the next day a similar attack again took place;—there were catching pains and motions in the neck, back, and right side of the chest, and of the diaphragm on the right side by which the false ribs of this side were drawn visibly inwards; hiccough, retching and eructation; irregularity in the respiration; fits of a dry, and repeated cough.—This affection continued not-

withstanding every remedy, and eventually exhausted the patient already much reduced by a severe disease and active remedies.

An examination was not permitted.

I shall conclude this Section by the following remark of Dr. Denman, in which I fully concur.

"We have indeed been told, that, in the dissections of some who are said to have died of this disease, (puerperal fever,) no appearances of inflammation have been discovered; but I should suspect that in such cases some important appearances had been overlooked, or that errors had been committed as to the nature of the disease, and probably in its treatment; unless the patients might be supposed to have died merely from excessive irritation."

The nineteenth case, in which no diseased structure was found on examination, might probably be instanced as a case in which this error in the diagnosis and expectation of morbid appearances, was likely to be committed.

SECTION III.

FATAL EFFECTS OF BLOODLETTING.

CASE XXIII.

MRS. V. of pale and sallow complexion and weakly constitution. Six days before her confinement of her first child, she was awoke in the night by severe pain of the head confined to one spot. This pain continued several hours, when Mrs. V. applied to her medical man; she was completely relieved by losing sixteen ounces of blood followed by purgative medicine, and she continued well.

Mrs. V's labour occurred on September the 1st. 1817, and was rather tedious, but natural, and she had no complaint until the second day, when she experienced a second attack of pain in the head, but less violent than the previous one. She was seen six hours after this attack; she then complained of pain and beating of the head, about the anterior part of the right parietal bone: the skin was hot, and the pulse frequent and strong.—Sixteen ounces of blood were taken from the arm, leeches ordered to be applied

to the temples, and an enema and purgative medicine were prescribed.

In three hours' time Mrs. V. was again visited, and it was deemed necessary to abstract more blood. —Six or eight ounces were therefore taken;—faintishness was induced,—and the symptoms were little abated.

On the succeeding morning, September the 4th, the symptoms still remained the same; the surface was hot; the bowels had been purged and the evacuations were natural.—The saline mixture was ordered. —At noon the symptoms remaining as before, the purgative medicine was repeated and a blister was applied.—In the evening, the evacuation of the bowels was satisfactory; the pain of the head was not severe, but there were much beating and a rushing noise; there was restlessness; and a teasing, irritative cough.—A draught with thirty drops of the tinctura opii was administered.

The next morning, September the 5th. Mrs. V. expressed herself as being much better from having enjoyed comfortable sleep. The surface was still hot, and the head still affected as before.—In the evening, there was a degree of tenderness in the region of the uterus; she dreaded the idea of being bled, from the faintishness she had before experienced from it, and said it would certainly kill her.

On the morning of the 6th. the pain in the region of the uterus was relieved, the head was affected as before, the window was kept open for want of air.—In the evening Mrs. V. complained of being fainty and low.—A mixture with camphor and sulphuric æther was prescribed.

On the 7th. the irritative cough again occurred; the pulse was frequent, from 120 to 130; and the other symptoms remained unabated.—A physician was consulted.—Sixteen ounces of blood were directed to be taken from the arm; a grain of calomel was given every three hours, and the effervescing medicine was ordered.

On the morning of the 8th. Mrs. V. appeared to be relieved in every respect; the heat of surface and the pain of the head were diminished; the blood presented the buffy coat.—It was thought proper to abstract more blood, as the last bleeding had apparently conferred benefit, and had been borne better than the preceding ones. Four teacupfuls of blood were taken;—the most dreadful fainting followed, with gasping, open mouth, a convulsive action of the diaphragm,—and in an hour or two death closed the scene.

CASE XXIV.

MRS. W. aged 33 weakly, was confined of her sixth child, after an easy labour, without flooding, at

midnight, on the 20th of July, 1818.—During the ensuing day all was well. The lochia were natural; there was no alvine evacuation, but the bowels had been open during pregnancy and twice evacuated during labour.

On the morning of the 22nd. Mrs. W. took half an ounce of the oleum ricini; and at four in the afternoon this medicine was repeated, the first dose having produced no effect; this, however, induced violent purging, gave great fatigue, and caused the patient to complain much.—At ten o'clock in the evening Mrs. W. was seized with rigor, which was violent and continued more than an hour; this was followed by great heat of skin, with wakefulness, restlessness, anxiety, sighing, and moaning.

At ten on the succeeding morning, there were great heat of skin and pain at the bottom of the back. —Four teacupfuls of blood were taken from the arm. —The symptoms still continued, and at seven in the evening, three teacupfuls of blood, and at eleven, three more, were taken from the arm, and twenty leeches were applied to the region of the uterus for the increased pain.—The pain still continued to increase, with restlessness, sighing, faintishness,—constant necessity for the smelling bottle;—apprehension of impending dissolution.

Afterwards the symptoms being unabated, a physician was consulted.—About three o'clock, three tea-

cupfuls of blood were again taken from the arm, and leeches again ordered to be applied; an enema was given which evacuated a quantity of fæces quite unexpected.—In a short time Mrs. W. became cold, and the surface clammy, with fainting, gasping breathing, &c. and all was done to restore warmth. After an interval of three hours the pain was still great.—Some opening medicine was prescribed.—But the state of sinking continued,—the smelling bottle, the fan, and fresh air were urgently called for.—All the symptoms, except the pain, were aggravated,—there were gasping, a slight convulsive struggle,—another,—and the patient expired.

CASE XXV.

MRS. X. aged 35, was confined on the 5th of December, 1818, at midnight, of her eighth child. She was delicate, but in good health, and the bowels were regular. The labour was favourable, but during the first six and thirty hours, lingering; the after pains and lochia were natural.

Mrs. X. appeared well on the 6th. and had had a good night; but she complained somewhat of the noise in the house, saying that it hurried and disturbed her.

On the morning of the 7th., she took an opening draught. This induced two unsatisfactory evacuations,

with great and continued nausea without vomiting; for this nausea she was ordered a cordial draught. Soon after taking the draught, Mrs. X. was seized with shivering. About eight hours after this, she was found complaining of pain in the region of the uterus. Three teacupfuls of blood were taken about seven o'clock in the evening, and about half after nine four more; fomentations, &c. were used in the interval. During the night, Mrs. X. was extremely restless, tossing about, wakeful, or with a little dosing, some delirium, and hurry and starting on awaking; there was dimness of sight; cold clammy perspiration and great coldness of her feet; sighing breathing and moaning, fainting, necessity for being fanned.—There were ten motions during the night.

The next morning Mrs. X. was again, as it were by infatuation, bled to three teacupfuls. This measure was followed by paleness, coldness, cold clammy perspiration, gasping, sighing breathing, and restlessness. A physician was consulted. The pains and tenderness had subsided; but the patient remained in a state of great lowness.—Mrs. X. was again visited in the evening, and wine whey, &c. were prescribed. —In the night Mrs. X. dosed, and awoke alarmed;—all at once the eyes became fixed, with gasping and sighing, and she expired.

SECTION IV

CASES OCCURRING INDEPENDENTLY OF THE PUERPERAL STATE.

CASES VI, XVII, and the second part of Cases IV, V, and XVI, properly belong to this Section.

CASE XXVI.

MRS. Y. aged 26, had been alarmingly indisposed during fourteen days when my attendance was requested. Straw had been spread over the pavement, and the candles were screened; she had awoke from her sleeps in great alarm, with palpitation, and fainting; and, on a subsequent occasion, the windows and doors were requested to be thrown open, and the smelling bottle was used.

Mrs. Y. was indisposed six weeks previously to the present attack. It was thought right to take away some blood. Mrs. Y. did not completely recover, but lost her good looks and continued to feel poorly. The complexion had become pallid; the bowels were constipated and disordered; the catamenia had long been profuse.

Mrs. Y. became indisposed when at a distance from home. At 11 o'clock at night she was seized with severe suffering, begged the window might be opened, and was relieved by taking a little brandy and water. On the ensuing day Mrs. Y. was low and ill, but free from palpitation or fainting. During the next three days Mrs. Y. continued better, and on the last, performed a journey home without any bad effect.

About 11 o'clock at night a few days after her return, another attack was experienced attended by palpitation, fainting, and coldness. A little brandy and water again afforded some relief.

On the next day, eight ounces of blood were taken from the arm. Mrs. Y. continued low and ill, but free from any attack of the kind formerly experienced. On the next day the same report was made.

At seven in the evening of the succeeding day there was another attack, and a more formidable one at eight. On the next day there was pain of the head; and on the next, early in the morning, there was an attack of urgent suffering, feeling of dissolution, sense of heat about the head and stomach; this was relieved; but Mrs. Y. continued weak and low. A similar paroxysm took place the ensuing day, and again on the next, leaving her exhausted, restless, and wakeful. The surface was affected with great perspiration and sensibility to the cold.

On the succeeding day there were frequent attacks of palpitation and fainting,—especially on falling asleep.

The following were the principal symptoms observed in this case; great susceptibility to fatigue, noise, or disturbance; sense of heat about the head, and vertigo; wakefulness; palpitation and faintishness, especially on falling asleep and on awaking; great oppression in the breathing, with eructation; painful spasms, and sense of numbness or torpor, of the limbs. These symptoms recurred in alarming paroxysms,—and from the slightest causes.

This affection yielded in the most favourable manner, almost without any reverse, to a cautious conjunction of aperients, opiates, the sp. ammoniæ aromat., and the tinctura camphoræ comp. and nourishment frequently given in small quantity,—every source of exertion, of hurry, of thinking, or of feeling, being vigilantly avoided.

CASE XXVII.

MRS. Z. aged 67, having laboured under a disordered state of the bowels, became affected on the 5th of March, 1820, with a sense of general coldness, and frequent but slight chillinesses, succeeded by heat; pain of the head with violent throbbing, chiefly of

the left side; palpitation of the heart; prostration of strength;—the night passed in a state of extreme restlessness.

On the 6th. the pulse was 130, and very irregular and intermittent; the light was offensive, and all noise irksome; the tongue was loaded, dry, and brown; much thirst; the skin hot and dry; the bowels costive; there was pain with tenderness of the left side below the hypochondrium, and extending backwards to the loins.—Leeches, fomentations, and an anodyne liniment were applied to the painful part, and afforded relief; leeches were also applied to the temples; and a lotion to the shaved scalp; and purgative and saline medicines were given.

For three or four days there was a gradual amendment. But on the 10th instant Mrs. Z. became extremely restless and irritable, with almost constant talking and tossing about, delirium, and intolerance of light. The delirium was peculiar,—the patient termed it a *rational delirium*, and said 'she felt as if all her faculties were unlocked,' and could not resist the propensity to talk. These symptoms continued several days with little variation, but at length increased to such an alarming degree as almost to preclude all hope of recovery; at one time Mrs. Z. raised herself suddenly upright in bed in a state of delirium; and at another there was an involuntary evacuation of the fæces.—At this time Mrs. Z. appeared to be dying;—

the countenance was pale and ghastly, the jaws set, the extremities cold and clammy, the pulse scarcely perceptible; she recovered, however, on taking a little wine or spirit.—The general treatment consisted of mild purgative medicines, and enemata, the operation of which always afforded relief, and quiet; from ten to fifteen drops of æther, and from five to ten drops of tinctura opii were given in an effervescent draught frequently; and gruel, sago and arrow root, with a little wine, were given in small quantities.

Under this treatment Mrs. Z. gradually recovered, —rapidly indeed to a certain point, and, since, more slowly, in consequence of her advanced age.

The following Cases occurred during the progress of some preceding disease; § LIX.

CASE XXVIII.

THIS case is an exemplification of the occurrence of the affection in question during the course of a disorder, in which considerable derangement of the digestive organs was productive of serious pulmonary affection. There was an alarming attack of active restlessness, and of rapid heaving breathing. A mild purgative was prescribed, which effectually relieved the symptoms.

CASE XXIX.

MR. S. aged 40, became affected with Rheumatism, with a loaded tongue and breath, dryness and heat of the skin. Whilst under the usual treatment of this disease, he became severely affected with hurried dreams, palpitation of the heart, and restlessness. These symptoms ceased on using purgative medicines. —Mr. S. recovered favourably and remains perfectly well.—There was no reason to lead me to suppose that the Heart was affected by Rheumatism.

CASE XXX.

MISS A. aged 30, was affected with severe inflammation of the peritonæum, for which she was bled profusely, and took purgative medicine. She became affected with severe, repeated, irritative cough, with twitching and catching muscular pains. These symptoms were removed by the tinctura opii and sp. ammoniæ arom.

CASE XXXI.

MISS N. aged 24, has had an attack of Inflammation within the Chest for which she has been bled many times, purged &c. When I saw her, she complained of beating of the head, fluttering, and palpitation of the heart, and beating in the left side of the

abdomen; of vertigo and faintishness when erect; of being hurried and agitated in her sleep by the slightest noise; she *wanted* the smelling bottle and *liked* the fresh air. She still complained of pain of the left side on taking a deep inspiration.—All these symptoms ceased by taking purgative medicines followed by draughts with tinctura opii, conjoined with nourishing diet.

CASE XXXII.

MRS. W. aged 33. August 1818. The following symptoms had occurred twice in this patient, during the course of the affection denominated by Dr. Willan, the summer fever, and each time, apparently from the action of a purgative; the first attack was, however, much less severe than the second.—Mrs. W. had been bled several times.—On the 5th, a purgative was ordered, which operated actively. During the succeeding night Mrs. W. was wakeful, restless, and somewhat delirious; I saw her at 5 a. m.; to the above symptoms there succeeded a hurried state of breathing, which continued three quarters of an hour, attended with a pulse accelerated from 125 to 140. Mrs. W. at length became more composed, and lay still with the eyes closed for about an hour. The breathing, however, again became hurried, the pit of the stomach was drawn in by a sort of spasmodic movement, once there was a little retching, and once a spasmodic affection of the diaghragm resembling

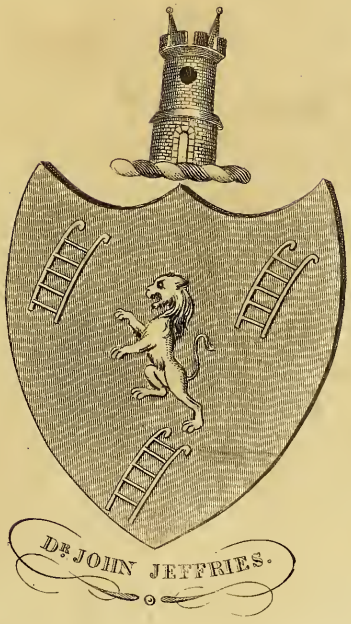
hiccough, and the hands were clasped. The affection was relieved by bathing the face with cold water, admitting the fresh air, by fanning, and by twice giving fifteen drops of the tinctura opii and of the sp. ammoniæ aromat. This affection recurred several times; at one time the pupils appeared contracted and fixed, and the body and limbs were stretched out spasmodically.—There was occasionally some hurry of breathing on the 7th.—Mrs. W. eventually recovered.

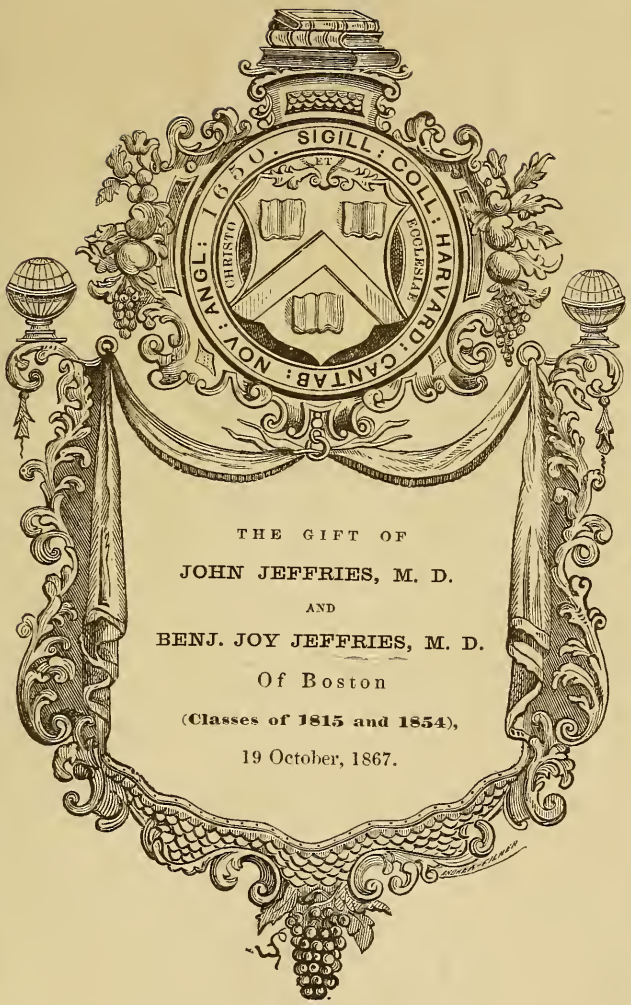
CASE XXXIII.

THE last case is that of a little Boy reduced by copious bleeding for an inflammatory affection. There supervened a continued state of irritability of temper, so that, when apparently exhausted, the little patient made great efforts to bite, scratch, and beat its attendant. This state of agitation continued until the powers of life became extinct.

FINIS.

W. Wheelhouse, Printer,
Nottingham.


Dr JOHN JEFFRIES.



THE GIFT OF

JOHN JEFFRIES, M. D.

AND

BENJ. JOY JEFFRIES, M. D.

Of Boston

(Classes of 1815 and 1854),

19 October, 1867.